



COLLEGE of AMERICAN
PATHOLOGISTS

March 21, 2017

Honorable Richard H. Smith
Chairman - Insurance Committee
220 State Capitol
Atlanta, GA 30334

Via email: richard.smith@house.ga.gov

Re: Request for Amendment for House Insurance Committee Substitute for Senate Bill 8

Dear Chairman Smith:

I am writing to you on behalf of the College of American Pathologists (CAP) and the Georgia Association of Pathologists (GAP) to request a critical technical amendment to Georgia Senate Bill 8. The CAP is a national medical specialty society representing approximately 17,000 physicians who practice laboratory medicine and anatomic pathology in community hospitals, independent clinical laboratories, academic medical centers and federal and state health facilities. The GAP is a state medical society representing many practicing pathologists in the state. **Our medical concern regarding this bill is that it includes a provision that will inadvertently jeopardize quality of patient care in Georgia. Specifically, Line 126:**

- (1) **Prior to the provision of non-emergency services**, inform a patient or prospective patient that the estimated amount the health care provider, group practice, diagnostic and treatment center, or health center will bill the patient for health care services is available upon request; and **(emphasis added)**

Under this language patient care is jeopardized by requiring a potential delay in the performance of a pathology service for a patient. For example, some surgical specimens require prompt analysis to be reported to a surgical team while the patient is under anesthesia and undergoing a surgical or diagnostic procedure. **This analysis cannot be delayed without the potential for patient harm.** Quite simply, ethical and legal standards of care do not allow for the performance of these services to be delayed by insurance considerations, as such could be detrimental to quality and to the actual performance of the service. We urge that the bill be amended to delete this requirement.

With respect to line 130, we have an additional concern:

- (2) Upon receipt of a request from a patient or prospective patient, **disclose to the patient or prospective patient in writing the amount or estimated amount**...will bill the patient or prospective patient for health care services provided or anticipated to be provided...

In the case of anatomic pathology, which involves the diagnosis of tissue specimens (i.e. biopsies), a pathologist cannot predict the type or number of specimens or anticipate what separate studies may be necessary. The type of specimen or complexity of the analysis is often not known in advance of the initial microscopic analysis conducted by the pathologist, making it impossible to provide a reliable estimate of charges or cost. It is for this very reason that this requirement was rejected by both the National Association of Insurance Commissioners (NAIC) and the National Conference of Insurance Legislators (NCOIL) in their consideration of model legislation on this issue. We urge that the bill be amended to also delete this requirement.



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Apart from the medical concern expressed herein, we do not believe that the bill is in the best interest of patient care and urge your rejection of the bill. At a minimum, the bill must be amended to ensure that patient care is not jeopardized in Georgia.

Regards,

Richard C. Friedberg MD, PhD FCAP
President

cc: Senator Rene S. Unterman (via Renee.Unterman@senate.ga.gov)
Georgia Association of Pathologists
Medical Association of Georgia